plicant(s)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Makoto YAMADA et al.

Serial No.

09/662,699

For

RECORDING APPARATUS, RECORDING METHOD, AND

DISC SHAPED RECORD MEDIUM

Filed

September 15, 2000

RECEIVED

PATENT 450100-02715

Examiner

Greta Lee Robinson

DEC 2 2 2003

Art Unit

2177

Technology Center 2100

745 Fifth Avenue New York, NY 10151

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on December 11, 2003.

Dennis M. Smid, Reg. No. 34,930

(Name of Applicant, Assignee or Registered Representative)

Signature

December 11, 2003

Date of Signature

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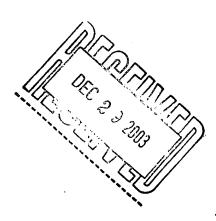
AMENDMENT

Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action of September 11, 2003, please amend this application as follows.





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Sir.

Transmitted herewith is an amendment in the above-identified application.

No additional fee is required.

X The fee has been calculated as shown below.

This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining	(3)	(4) Highest number	(5)	(6)	(7)
	after amendment		previously paid for	Present extra	Rate	Additional fee
Total claims	22	Minus	= 20	2 ×	\$18(9)	= \$36.00
Independent claims	4	Minus	= 3	1 ×	\$84(42)	= \$84.00
	<u> </u>		Total addit this ame		\$120.00	

- If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- If the highest number of total claims previously paid for is less than 20, write "20" in this space.
- If the highest number of independent claims previously paid for is less than 3, write "3" in this space.
- __ This application contains a multiple dependent claim. The required fee of \$260 (\$130) has been previously paid _, or is paid herewith _.
- This response is being field within the month following the expiration of the term originally set therefor.

 This is a petition to request a ____ month extension of time. A check covering the cost of the petition is enclosed.
- A check in the amount of \$120.00 is attached, which covers the cost of ⊠ additional claims _____ petition for extension of time.
- Charge \$_ to Deposit Account No. 50-0320.
- X Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

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Dennis M. Smid, Reg. No. 34,930

Name of Applicant, Assignee or Registered Representative

Signature

December 11, 2003

Date of Signature

FROMMER LAWRENCE & HAUG LLP Attorneys for Applicant(s)

Reg. No. 34,930

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